

PART B - FEE(S) TRANSMITTAL

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48080

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11/02/2006

INTERNATIONAL FLAVORS & FRAGRANCES INC.
 521 WEST 57TH ST
 NEW YORK, NY 10019

11/27/2006 HDEMESS2 00000088 121295 10022636

01 FC:1501 1400.00 DA
 02 FC:1504 300.00 DA

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IVONE MILANI

(Depositor's name)

Ivone Milani

(Signature)

NOV 27, 2006

(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/022,636	12/17/2001	Virgil A.G. Williams	IFF-26	1190

TITLE OF INVENTION: TRANSPARENT, VEGETABLE-BASED, SUBSTANTIALLY HYDROCARBON-FREE CANDLE ARTICLE

APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1400	\$300	\$0	\$1700	02/02/2007

EXAMINER	ART UNIT	CLASS-SUBCLASS
TOOMER, CEPHIA D	1714	044-275000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).
 Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.
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2. For printing on the patent front page, list
 (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,
 (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1. Joseph Fleighter
 2. Elizabeth M. Quirk
 3. _____

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

International Flavors & Fragrances Inc. NEW YORK, New York

Please check the appropriate assignee category or categories (will not be printed on the patent): Individual Corporation or other private group entity Government

4a. The following fee(s) are submitted:

Issue Fee
 Publication Fee (No small entity discount permitted)
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A check is enclosed.
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 The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 12-1295 (enclose an extra copy of this form).

5. Change in Entity Status (from status indicated above)

a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.
 b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

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Authorized Signature Elizabeth M. Quirk

Date Nov. 27, 2006

Typed or printed name Elizabeth M. Quirk

Registration No. 53,646

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